

2023 Benefits Open Enrollment

Children's Home & Aid



children's home & aid



Agenda

- What's New for 1/1/2023
- Review Medical Plans and Health Savings Account (HSA)
- Review flexible spending accounts (FSA)
- Review the dental & vision benefits
- Review the life and disability benefits
- Review voluntary plans
- Review all perks with current plans
- Action items/next steps
- Questions



New for 2023

- **New way to enroll – sign up for a counseling session with EOI enrollment counselors**
- **STAYING** with BlueCross BlueShield for medical coverage
- **Enhancing** the prescription drug program
 - Certain maintenance drugs on the HSA plan are covered at 100% in certain situations
 - Prudent Rx specialty drug payment enhancements
- **Healthiest You** telemedicine coverage at 100% coverage
- **Market & utilization** adjustments to medical contributions



2023 Benefits Package

All Benefits Effective January 1, 2023

Medical Plan Comparison

Plan	Differences	Similarities
PPO	• Highest employee premiums • Lowest annual deductible • Office visits and prescriptions are not subject to the deductible • Same network as HSA	• Unlimited lifetime maximums • Coverage for both in-network and out-of-network services • Same pharmacy network • Preventive care is covered at 100% on all plans
HSA	• Lower employee premiums • Highest annual deductible • All services are subject to the annual deductible (no copays) • Pre-tax, tax deferred contributions to Health Savings Account • CH&A contributes to HSA Account • Same network as PPO • Certain maintenance medications now covered at 100%	
PPO NN (Narrow Network)	• Lowest employee premiums • Median annual deductible • Office visits and prescriptions are not subject to the deductible • Network excludes some doctors and hospitals	



Medical Plan Comparison

Choice of plan options:	PPO	PPO NN (Narrow Network)	HSA
Deductible (All Deductibles Embedded) Individual (In-Network) Family (In-Network)	\$1,000 \$2,000	\$2,000 \$4,000	\$3,000 \$6,000
Coinsurance In-Network	80%	80%	90%
Out-of-Pocket Max Individual (In-Network) Family (In-Network)	\$3,500 \$7,000 <i>Includes Deductible</i>	\$7,000 \$14,000 <i>Includes Deductible</i>	\$4,000 \$8,400 <i>Includes Deductible</i>
Physician Services (In-Network) Well Adult / Well Child Physician Office / Specialist Visit X-Rays / Lab Diagnostics	100% \$30 Copay / \$40 Copay Deductible then 80%	100% \$60 copay / \$80 copay Deductible then 80%	100% Deductible then 90% Deductible then 90%
Telemedicine HealthiestYou/Teladoc	No cost to You or Your Family Members		
Emergency Room	\$200 Copay	\$400 Copay	Deductible then 90%
Prescription Drug Coverage Through CVS / Caremark Retail (Generic / Preferred / Non-Preferred) 30-Day Supply Mail Order (Generic / Preferred / Non-Preferred) 90-Day Supply	\$10/40/60/80% \$25/80/150	\$10/40/60/80% \$50/160/300	Deductible then 90%





Meet Gena

Gena's care includes:

- an annual physical
- refills a generic prescription a couple times during the year
- visits to her primary care provider (PCP) when she are sick and gets prescribed antibiotics

Gena is 26 and enrolling in coverage for the first time. She is unmarried with no children. She is generally healthy and doesn't need a lot of medical care.



Here's how Gena's health care would be covered with each of the plans:

Service (in network)	Average Cost	PPO	PPO Narrow Network	HSA
Annual physical	\$120	Preventive Medicine is covered at 100% on all Plans		
2 generic prescriptions	\$40 x2 = \$80	\$10 Copay x2 = \$20	\$10 Copay x2 = \$20	Ded, Coinsurance - \$0 if covered maintenance medication
Primary care sick visit	\$160	\$30 Copay	\$60 Copay	\$110 (\$50 BlueCross PPO network discount)
Generic antibiotic prescription	\$80	\$10 Copay	\$10 Copay	\$60 (\$20 CVS discount)
Cost of care for the year	\$440	\$60	\$90	\$170
Less Children's Home & Aid \$750 contribution to HSA		N/A	N/A	\$170 - \$750 = \$0, +\$580 to save into HSA account
Annual Health plan Contributions		\$149.33 x 26 pay periods = \$3,882.60	\$59.07 x 26 pay periods = \$1,535.88	\$73.84 x 26 pay periods = \$1,919.76
Total Annual Costs (Contributions + Cost of Care)*		\$60 + \$3,882.60 = \$3,942.60	\$90 + \$1,535.88 = \$1,625.88	\$0 + \$1,919.76 = \$1,919.76 + \$580 to save into HSA account



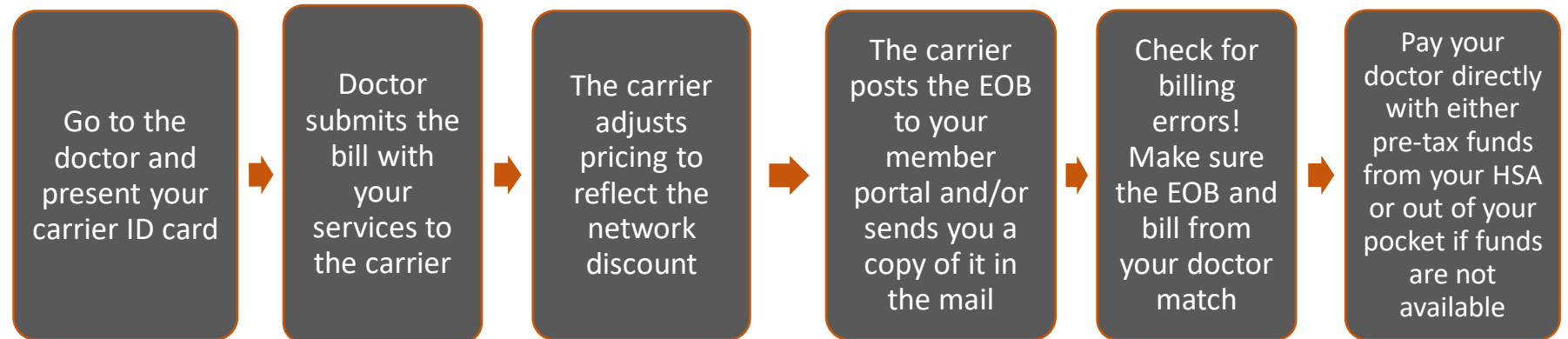
High Deductible Medical Plan (HDHP)

- An HDHP is a high deductible health plan with a higher deductible threshold than most traditional PPO plans
- Almost all medical expenses are paid for by you at 100% (less Blue Cross network discounts) prior to meeting your deductible
- This includes:
 - Doctor visits
 - Specialist visits
 - Prescriptions
 - Emergency Room visits
- The HDHP plan utilizes the same PPO network as the PPO plan
 - Same doctors and hospitals
 - No disruption in medical services or care



HDHP Plan - How does it really work

- You should avoid paying at the point of service when at all possible
 - Making sure the carrier discounts are applied to your medical services will be key **before** paying the bill
 - The one exception to paying at the point of service is at the pharmacy
- Following these simple steps should help...



What's a Health Savings Account (HSA) Plan

- A health savings account (HSA) is comprised of two components that make up one plan



What's an HSA



- An HSA is a health savings account, also known as a **tax-exempt savings account** funded with tax-free dollars, and used exclusively to pay for **qualified medical expenses** and/or provide savings for the future
- Individuals can deduct the dollars they contribute to their HSA from their gross income
 - Lower taxable income
 - Tax-free medical dollars (for qualified expenses)
- You are eligible for an HSA if:
 - You are covered under a High Deductible Health Plan HDHP
 - You are not covered by any other health coverage that is not an HDHP
 - You are not enrolled/eligible in Medicare (under age 65)
 - You are not claimed as a dependent on someone else's tax return



What's a qualified medical expense

- Distribution is tax-free for *qualified medical expenses*

Examples of qualified medical expenses under Section 213(d) of the IRS code



- Medical services, procedures and treatments
- Diagnostic services
- Drugs
 - Prescriptions
- Vision (includes LASIK)/hearing
- Medical equipment
- Mental health services
- Assistance for disabled
- Dental (includes orthodontia)
- Long Term Care premiums
- Medicare copays, deductibles and coinsurance



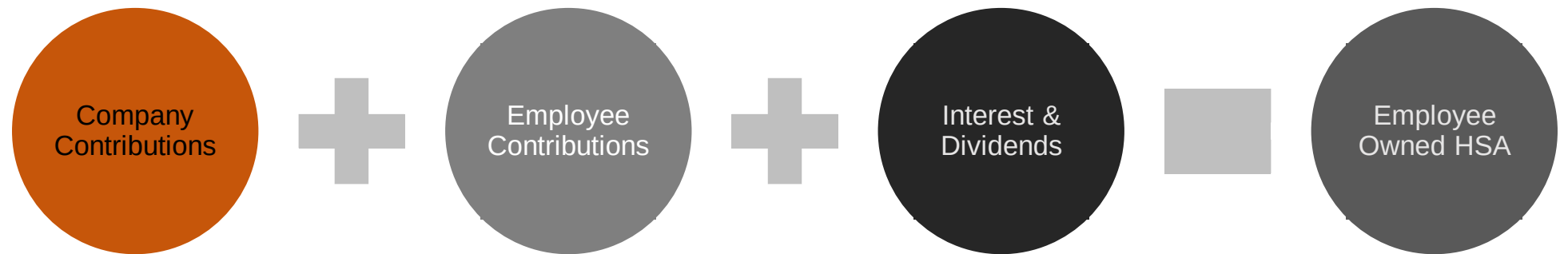
Advantages of your HSA



- Unused funds rollover from year to year
 - It's not use it or lose, it's use it or keep it
 - Infinite growth in your account
- There's a triple tax savings
 - You do not pay taxes on funds going into this account
 - You do not pay taxes on interest or dividends earned
 - You do not pay taxes when used for qualified medical expenses
- The account belongs to you
 - Regardless if you change between plans, retire or even leave the company the account remains yours
 - You're the owner and manager of this account



The power of saving



Tier	Current Employer Contribution
Employee	\$750
Employee + Spouse	\$1,500
Employee + Child(ren)	\$1,500
Family	\$1,500





How much can I contribute

The Company will contribute...	Self-Only	Family
HSA Contributions:	\$750	\$1,500

You can contribute (tax-free) an additional...	Self-Only	Family
Maximum Employee HSA Contributions:	\$3,100	\$6,250

Annual IRS Contributions	Self-Only	Family
Maximum HSA Contributions:	\$3,850*	\$7,750*
“Catch-up” contributions (individuals age 55 and older)	\$1,000	

***Amounts are regulated by the IRS and adjusted annually for inflation.**



Employees Newly enrolling in the HSA

- Banking and your HSA

- Children's Home & Aid has partnered with BRi as their preferred banking partner
 - As a new enrollee in the HSA, you'll need to open your account - you are the owner of it
 - Contributions made by Children's Home & Aid will be deposited into your health savings account on January 1st
 - Additional contributions you choose to make will either be deposited on a a per pay period basis, or you may choose to make a lump sum, not to exceed the combined IRS limits
- Once the account is opened, you'll receive a debit card to pay for your medical expenses
 - Remember, this account works like a standard checking account in that money must be in the account in order for funds to be available for payment of services
 - Money in this account should only be used for **qualified medical expenses** only so that taxes and penalties do not occur
- You can put money into your HSA post-tax at any time, however, you'll need to claim that money on your taxes as a deduction in order to take advantage of the tax savings



Tips to save money



Preventative/Wellness Exams are covered at 100%

- Preventive care is equal to one annual physical exam per year per enrolled member
 - Females get an annual well-woman exam covered at 100% in addition to their annual exam
- Preventive exams include age-specific tests, blood work and more
- No deductible expenses apply – the exam is completely no cost to you



Emergency Room

- ER average cost is well over \$1,000
- Urgent Care average cost is \$200
- Doctor's office average cost is \$125
- Minute Clinic or Take Care Clinic average cost is \$79
- Nurse Line
- HealthiestYou Telemedicine – no charge to you



Tips to save money



High cost scans, x-rays and tests

- MRIs, PET scans, CT scans, etc. are nearly 2/3 less costly at free-standing imaging centers than at hospitals
- Finding an in-network free standing imaging center saves you loads of \$\$\$



Prescription drugs

- Ask your doctor if there is a generic version of the medication they're prescribing or you're taking
 - Generic equivalent medications have the same active ingredient as their Brand name counterpart
- Take advantage of the Generic Prescriptions Savings Programs out there
 - Walmart, Target, Meijer, etc.
- You do not need to be a member to utilize the pharmacy at Costco
- Ask about free samples and/or manufacturer rebates



Pharmacy Program Online Resources

Registering early online allows you to:



Check plan coverage.



Locate in-network retail pharmacies near you.



View profile information and set up access for appropriate family members.



Set up shipping and billing addresses, payment methods, and order status alerts.



Check medication costs in advance and find out estimates on copays*, coinsurance and maximum out-of-pocket costs.



Set notification preferences and choose from text, email or phone.

Register today. Go to [Caremark.com/headstart](https://www.caremark.com/headstart) or download the mobile app.



New Telemedicine: Healthiest You

Healthiest You is a healthcare service that offers convenient, confidential access to quality doctors 24/7, anytime, anywhere. By scheduling a visit with a doctor you can be diagnosed, treated and prescribed medication if necessary. HealthiestYou includes general medicine, mental health, dermatology, nutrition, back and neck care & expert medical services for FREE!

Services are unlimited and available to you and your whole family!

*When should I use HealthiestYou?

1. If you're considering the ER or urgent care center for a non-emergency medical issue
2. On vacation, on a business trip, or away from home—Services available in all 50 states
3. Your physician is out of town or not available
4. For short term prescription refills that are not a DEA controlled substance

How can I start using HealthiestYou?

Register Your Account. Activate your employee membership any of these 3 different ways.



App: download the HealthiestYou or HY app in your googleplay/app store



Website: member.healthiestyou.com



Call our Hotline#: 866-703-1259 x1

Set up your account in 4 Easy Steps-

1. **Select "Register"**- then choose "Employee" as your membership type.
**Dependents 18+ will need to register their own accounts and create a separate login. Same steps as Primary!*
2. **Enter Primary members info to verify Eligibility-** Last name, Date of Birth, and ZIP code.
3. **Finalize your account-** Enter a valid email address, password, best number for our doctors to reach you, your preferred language, and accept terms and conditions.
4. **Complete Medical History-** enter current Height, Weight, list of current medications etc.

You're all set! Just remember you have HealthiestYou as your first line of defense the next time you or your family members get sick.



Download the app to talk to a doctor

Visit member.healthiestyou.com

Call 866-703-1259 | Download the app  



New Telemedicine: Healthiest You Q&A

Does HealthiestYou replace my doctor?

- No. HealthiestYou should only be used for non-emergency illnesses.

How do I set up my account?

- You will need to wait until January 1st, 2023 to set up your account. At that time download the app via the QR code, in the app store or online.
 - You will need to enter in your last name, date of birth & zip code
 - Create a password

Do I need to have my insurance information available?

- No. HealthiestYou is a separate benefit, and your insurance information is not required to have a visit.

How much does it cost?

- \$0

How do I pay for the visit?

- **There is no fee.** HealthiestYou includes general medical, mental health, dermatology, nutrition, back & neck care & expert medical advice free of charge.

Download the app to talk to a doctor



Download the app to talk to a doctor

Visit member.healthiestyou.com

Call 866-703-1259 | Download the app  



Medical Contributions

Medical Premiums – 26 pay periods*						
Coverage Tier	PPO		HSA		PPO NN	
	Per pay Period	Monthly	Per pay Period	Monthly	Per pay Period	Monthly
Employee	\$149.33	\$323.55	\$73.84	\$159.98	\$59.07	\$127.99
Employee + Spouse	\$246.60	\$534.31	\$138.85	\$300.85	\$111.08	\$240.67
Employee + Child(ren)	\$237.49	\$514.56	\$124.23	\$269.16	\$99.37	\$215.31
Family	\$311.31	\$674.51	\$203.04	\$439.92	\$162.44	\$351.94

*A surcharge of \$50 per pay period will be added to your medical plan contribution if your spouse is currently employed or eligible for health coverage through his or her employer, but you elect to cover your spouse on a CH&A health plan instead.

In order to enroll your spouse/domestic partner in the medical plan, you will need to complete and return the Spouse Group Coverage Certification.



FSA/HSA comparison (limits are annually)

HSA vs. FSA			
	Health Savings Account (HSA)	Flexible Spending Account (FSA)	Limited Purpose Flexible Spending Account (FSA)
Purpose	- Pay for current and future expenses on a tax-free basis - Save for retirement	- Pay for current expenses on a tax-free basis - Both medical and dependent care accounts available	Pay for current dental and vision expenses on a tax-free basis
Unused Funds	- Rollover year to year - You own your account –money is yours to keep	- Use it or lose it - Mass Transit & Parking Rolls Month to Month	Use it or lose it
Annual Funding Limits	- Children's Home & Aid contributes \$750 single or \$1,500 family annually, provided on January 1st. \$3,850 2023 individual account max, \$7,750 family - Children's Home & Aid's HSA contribution counts towards the annual maximum	\$3,050 medical FSA \$5,000 dependent care FSA \$300 Parking \$300 Mass Transit	\$3,050 annually
Funding	- Funds are deducted pre-tax up to the annual IRS limits - Funds are only available once they have been contributed	- Funds are deducted pre-tax - Full medical FSA amounts available immediately; dependent care FSA only reimbursed once contributed	- Funds are deducted pre-tax - Funds available immediately





How the FSA Plan Works

- **Use It or Lose It Rule**

- If you contribute dollars to a reimbursement account and do not use all the money you deposit, you will lose any remaining balance at the end of the eligible claims period
 - This rule, established by the IRS as a component of tax-advantaged plans, is referred to as the “use it or lose it” rule
- To avoid losing any of the funds you contribute to your FSA, it’s important to plan ahead as much as possible to estimate what your expenditures will be in a given plan year





BRI Flexible Spending Account (FSA)

- **Health FSA – Maximum Election \$3,050 – Available for employees not electing HSA coverage in 2022**
 - A health FSA refers to a medical reimbursement plan that is a “flexible spending arrangement” (FSA)
 - Employees can use a health FSA to pay for qualified expenses that are not reimbursed through insurance or any other arrangement
 - Insurance co-pays, deductibles, eyeglasses, and orthodontia are common examples of health FSA expenses
 - You will be eligible to roll over a portion of your unused benefits to the 2023 plan year – If you enroll in the HSA plan your funds will be automatically rolled into a Limited Purpose Health FSA following the conclusion of the 3 month runout period on March 31st, 2023
 - During the runout period you are allowed to claim expenses incurred in 2022 against the remaining balance of funds from 2022
- **Limited Purpose Health FSA – Maximum Election \$3,050 – HSA plan participants**
 - Rollover amounts for those employees enrolling in the HSA for 2023 will be on a limited purpose basis
 - The Limited Purpose FSA (LPFSA) is designed for employees who have elected the HSA plan
 - The LPFSA allows you to set aside funds to pay for post-deductible dental and vision expenses only
 - If you enroll in the HSA plan, you can elect to use the HSA funds for medical only and then your LPFSA for dental and vision expenses only





MetLife Dental PPO Plan | PDP Plus Network

Dental	IN-Network	OUT-of-Network
Benefit Period Maximum	\$1,500	
Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Waived for Preventive	Yes	
Coinsurance Levels		
Preventative	100%	80%
Basic	80%	80%
Major	50%	50%
Orthodontia	50%	50%
Ortho Lifetime Max	\$1,000	

- Staying in-network will always save you money on your dental expenses
- To confirm whether your dentist is in-network or to register, please see below:
- www.metlife.com to find an in-network dentist
- No ID Cards
- Network: PDP Plus Network



Dental Contributions



Dental Premium – 26 pay periods		
Coverage Tier	Dental PPO	
	You Pay	Monthly Cost
Employee	\$7.84	\$16.99
Family	\$15.70	\$34.02





MetLife Vision Plan | Low Option

Vision	In-Network	Out-of-Network
Routine Eye Exam One every 12 months	\$10 copay	\$45 max allowance
Lenses One pair each 12 months - Single Vision Lenses - Bifocal Lenses - Trifocal Lenses - Lenticular Lenses	\$25 copay \$25 copay \$25 copay \$25 copay	Allowance Varies
Frames One Pair each 24 months	\$130 allowance + 20% off balance	\$70 max allowance
Contact Lenses One pair each 12 months (either contacts or glasses)	\$135 allowance	\$105 max allowance

- Staying in-network will always save you money on your vision expenses
- Go to www.davisvision.com to find a participating eye care provider in the network
- No ID Cards
- Vision Network: Davis Vision Network





MetLife Vision Plan | High Option

Vision	In-Network	Out-of-Network
Routine Eye Exam One every 12 months	\$10 copay	\$45 max allowance
Lenses One pair each 12 months - Single Vision Lenses - Bifocal Lenses - Trifocal Lenses - Lenticular Lenses	\$25 copay \$25 copay \$25 copay \$25 copay	Allowance Varies
Frames One Pair each 12 months	\$130 allowance + 20% off balance	\$70 max allowance
Contact Lenses One pair each 12 months (either contacts or glasses)	\$135 allowance	\$105 max allowance

- Staying in-network will always save you money on your vision expenses
- Go to www.metlife.com to find a participating eye care provider in the network
- No ID Cards
- Vision Network: Davis Vision Network



Vision Contributions



Vision Premium – 26 pay periods				
Coverage Tier	Low Option		High Option	
	Per Pay Period	Monthly	Per Pay Period	Monthly
Employee	\$2.67	\$5.78	\$2.97	\$6.43
Family	\$6.30	\$13.64	\$7.02	\$15.20





Prudential Basic Life/AD&D

- All employees are offered a benefit 2 times their annual base salary to a maximum of \$750k. All coverage amounts over \$375,000 require medical underwriting and are not guaranteed.
 - AD&D (Accidental Death & Dismemberment) coverage is equal to 100% of the life insurance benefit
- Remember to update your beneficiary information
 - Remember this is the person you intend to get your life insurance should something happen to you
 - It's not who you're legally bound to, it's who is written down
 - **There is an option to update your beneficiary information in the Ultipro system**
- This coverage is 100% employer paid





Prudential Voluntary Life/AD&D

- Employees are eligible for up to \$750,000 of coverage in increments of 1, 2, 3 or 4 times annual income
 - The guaranteed coverage amount is limited to the lesser of 2x annual earnings or \$375,000
No amount of coverage is guaranteed for existing employees/spouses/children newly enrolling
- Spouses are eligible for up to \$50,000 of coverage not to exceed 50% of employee benefit in increments of \$5,000
 - Guarantee Issue is \$25,000 (new hires only)
 - Coverage terminates at age 70
- Children are eligible for flat policies of \$5,000 or \$10,000
 - Eligible children age range is 14 days to 26 years old.
- Employees are responsible for 100% of the premium on this plan





Prudential Short Term Disability

- Income protection in the short term should you experience an injury or illness over a prolonged period of time
 - STD begins after 7 consecutive days of injury or illness
 - STD benefit pays up to 60% of pre-disability earnings to a maximum of \$1,000 per week
 - Benefit lasts for up to 12 weeks
- Program allows for maternity benefits:
 - 2 weeks pre-partum
 - 6 weeks post-partum for a vaginal delivery
 - 8 weeks post-partum for c-section delivery
- ***This program is paid for by Children's Home & Aid, there is no cost to you***
- You may use sick leave benefits, but the STD will not pay until your sick leave is exhausted





Prudential Long Term Disability

- Long-Term Disability
 - Benefit begins after 90 days of continuous injury or illness
 - Benefit pays up 60% of pre-disability earnings to a maximum of \$10,000 per month
 - Your employer pays for 100% of the premium on this plan
 - Income Protection when you need it most





Supplemental Voluntary Benefits

- Critical Illness through MetLife
 - Provides a lump sum benefit in the event of a covered critical illness diagnosis
 - Does not cover currently diagnosed illnesses
- Accident Insurance through MetLife
 - Provides a lump sum benefit in the event of a covered accident
- Hospital Indemnity through MetLife
 - Provides a lump sum benefit for hospital admission
- Discuss optional coverages with your enrollment counselor during your counseling session – additional information available in the online benefit library





Supplemental Voluntary Benefits

- Nationwide Pet Insurance
 - Provides Individual policies for pets – available on the Nationwide Pet Insurance website
 - See benefit Summary





NEW! Employee Assistance Program - CCA

- **What is CCA@YourService?** A free, confidential benefit available 24/7/365 to help you and your family members:

- Fortify your mental health
- Bounce forward from setbacks
- Tackle your to-do list
- Optimize your work-life balance

- **What type of assistance is available?**

- In-the-moment telephonic and digital support
- Up to 5 free solutions-focused counseling sessions per individual, per issue, per year
- Referrals to services in your local area
- Practical tools, information, and resources
- Robust website featuring a resource library, free seminars, instant messaging with work-life specialists, and more

- **Can family members use the service, too?**

- Yes!

CONNECT TO GET STARTED:

PHONE:

800-833-8707

WEB:

www.myccaonline.com

(Company Code: **INSERT**)

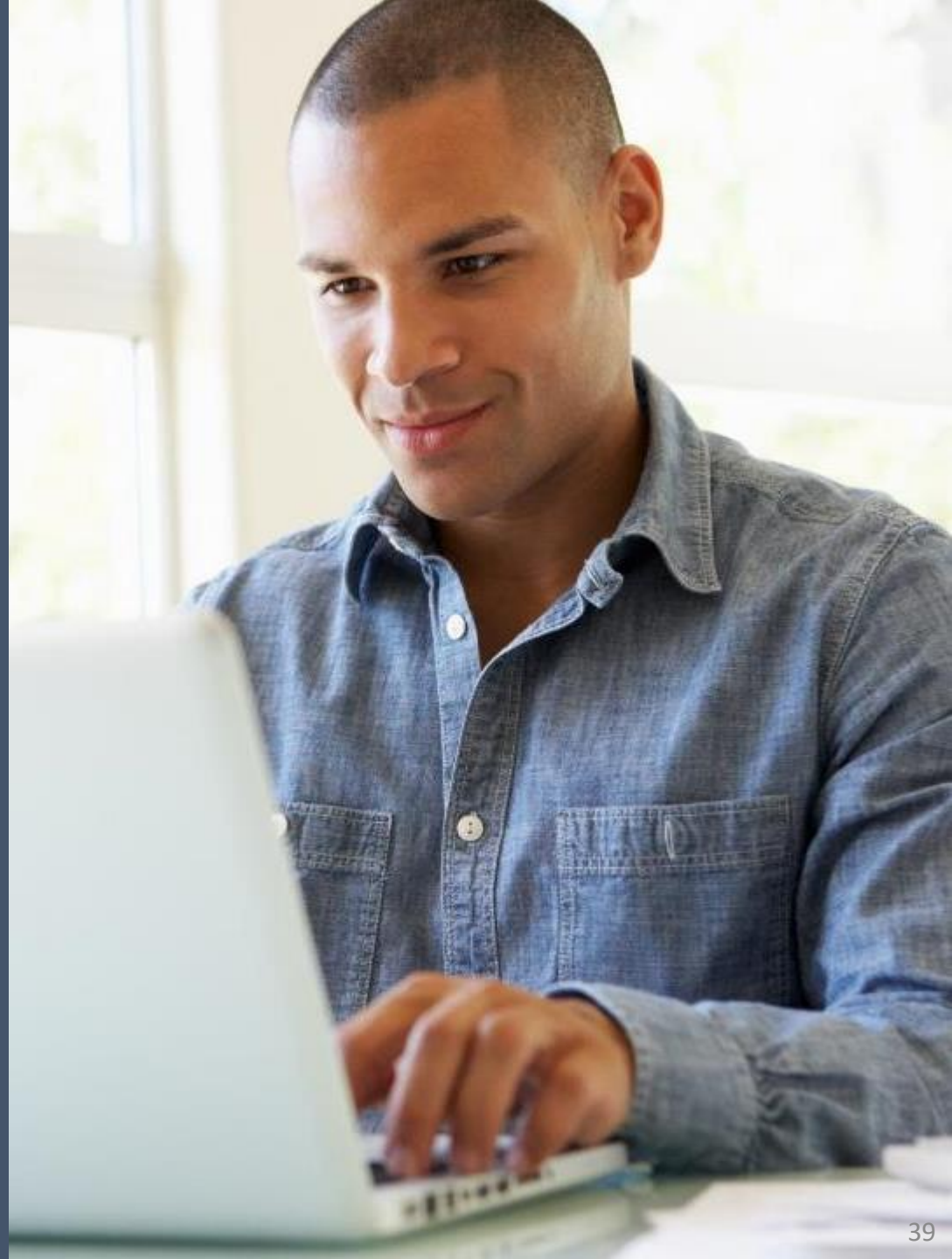
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CCA@YourService

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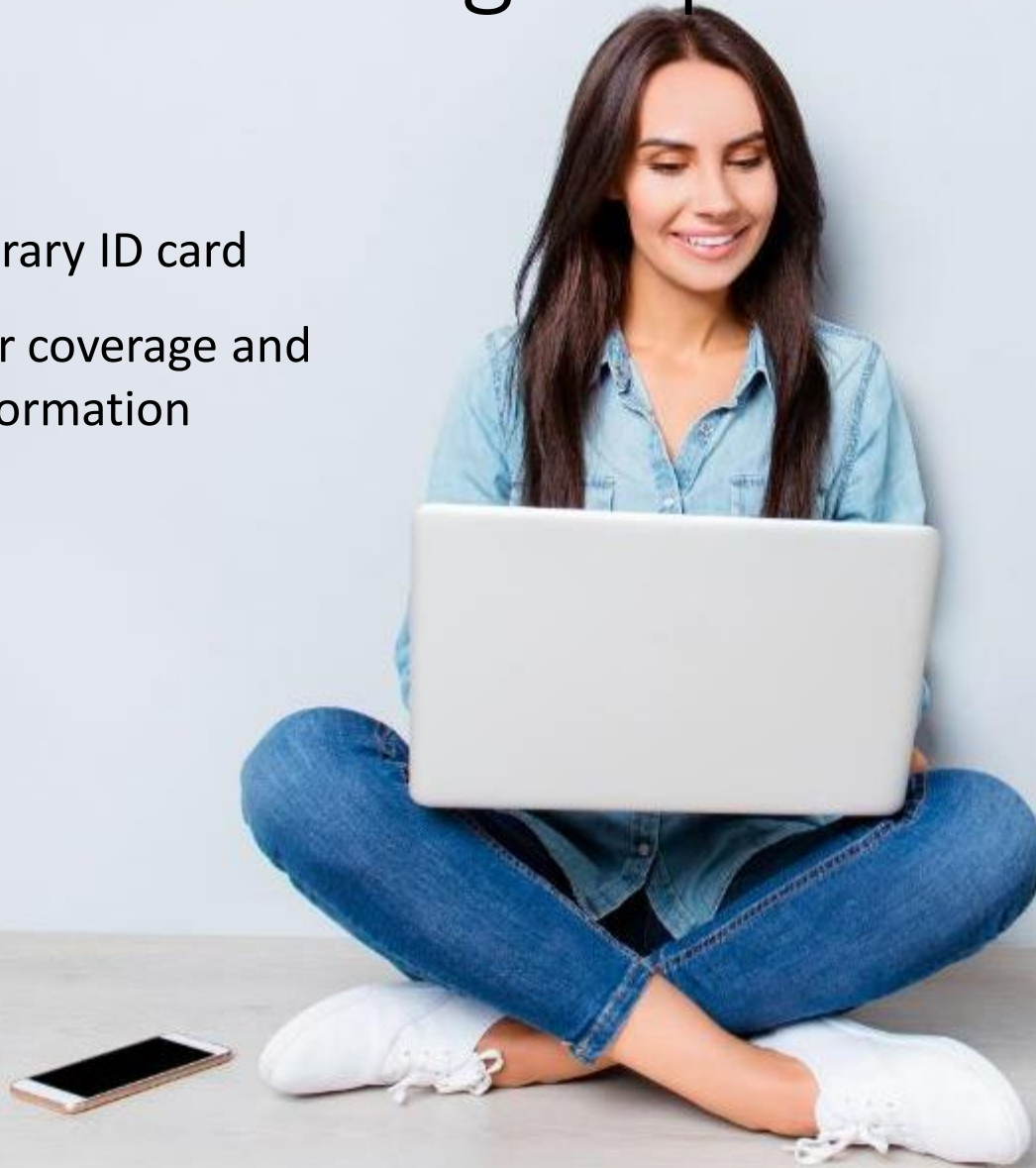


Blue Access for MembersSM

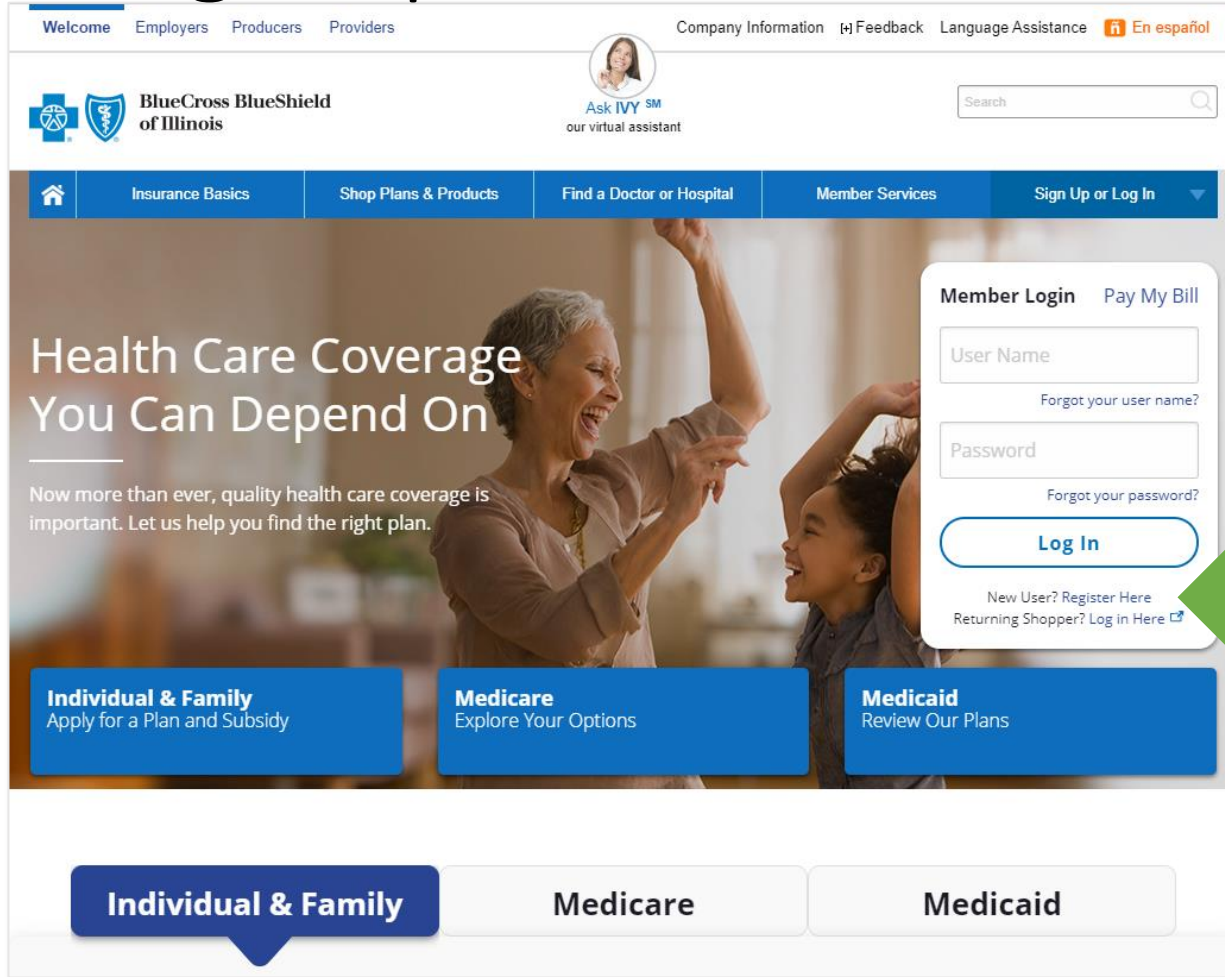


Tools at Your Fingertips

- Get a temporary ID card
- Confirm your coverage and eligibility information
- Find in-network doctors, hospitals and other health care providers
- Review claims for medical, pharmacy and dental services* all in one place



Sign Up for Blue Access for MembersSM



The screenshot shows the BlueCross BlueShield of Illinois website. At the top, there is a navigation bar with links for Welcome, Employers, Producers, Providers, Company Information, Feedback, Language Assistance, and an En español button. Below this is a search bar and a virtual assistant icon labeled 'Ask IVY SM'. The main navigation bar includes links for Insurance Basics, Shop Plans & Products, Find a Doctor or Hospital, Member Services, and Sign Up or Log In. The main content area features a large image of a woman and a child celebrating, with the text 'Health Care Coverage You Can Depend On' and a subtext 'Now more than ever, quality health care coverage is important. Let us help you find the right plan.' Below this are three blue buttons: 'Individual & Family Apply for a Plan and Subsidy', 'Medicare Explore Your Options', and 'Medicaid Review Our Plans'. A white 'Member Login' box is overlaid on the right side, containing fields for 'User Name' and 'Password', each with a 'Forgot your user name?' or 'Forgot your password?' link. A 'Log In' button is at the bottom of the box. Below the 'Log In' button are links for 'New User? Register Here' and 'Returning Shopper? Log in Here'. A green arrow points from the 'Register Here' link to a dark blue box on the right.

Go to bcbsil.com and log in to Blue Access for Members via web or mobile

Click [Register Here](#) if you are a new user

To register you will need your identification number on the front of your ID card **OR** you can call the Customer Service number on the back of the card.



Pharmacy Program Online Resources

Registering early online allows you to:



Check plan coverage.



Locate in-network retail pharmacies near you.



View profile information and set up access for appropriate family members.



Set up shipping and billing addresses, payment methods, and order status alerts.



Check medication costs in advance and find out estimates on copays*, coinsurance and maximum out-of-pocket costs.



Set notification preferences and choose from text, email or phone.

Register today. Go to [Caremark.com/headstart](https://www.Caremark.com/headstart) or download the mobile app.



Next steps

- Open enrollment is now – sign up for a counseling session now
 - <https://email.eoiservice.com/childrens-home-aid-benefits>
- Your next opportunity to make changes to your existing coverage without a qualified life event will be next year during open enrollment time
- All employees will be required to complete a counseling session by Friday, November 11th
- Be sure to take this opportunity to update your beneficiary(ies)
- Your next opportunity to enroll without a qualifying life event will be during the 2023 open enrollment for a January 1, 2024 effective date
- If you experience a qualifying life event you must make any necessary election changes within 30 days of the event – notify benefits team



Questions?



Meet Pam & Family

Pam has a husband and two young children. She and her family are generally healthy, however, her young ones get sick a few times, and her son injures his leg playing sports.



Pam's care includes:

- all family members get annual physicals
- her husband refills a preferred brand prescription a couple times during the year
- the two sons visit their primary care provider (PCP) when they are sick and get prescribed antibiotics
- one son visits the emergency room and receives an x-ray and cast, then has two follow up visits



Here's how Pam's health care would be covered with each of the plans:

Service (in network)	Average Cost	PPO	PPO Narrow Network	HSA
4 annual physicals	\$120 x2 = \$480	Preventive Medicine is covered at 100% on all Plans		
2 preferred brand prescriptions	\$400 x2 = \$800	\$60 x2 = \$120	\$60 x2 = \$120	\$300 x2 (\$100 CVS discount per fill) = \$600
P4 primary care sick visits (2 visits for each child)	\$160 x2 = \$320	\$30 Copay x2 = \$60	\$60 Copay x2 = \$120	\$110 x2 (\$50 BlueCross PPO network discount per visit) = \$220
4 generic antibiotic prescriptions (2 per each child)	\$40 x2, x2 = \$160	\$10 Copay x2, x2 = \$40	\$10 Copay x2, x2 = \$40	\$30 x2, x2, (\$10 CVS discount per script) = \$120
ER Visit (including x-ray and cast)	\$2500	\$200 Copay	\$400 Copay	\$1,375 (\$1,125 Blue Cross PPO Network Discount = \$1,375
Cost of care for the year	\$4260	\$420	\$680	\$2,315
Less Children's Home & Aid \$1500 contribution to HSA	N/A	N/A	N/A	\$2,315 - \$1500 HSA = \$815
Annual Health plan Contributions		\$296.49 x 26 pay periods = \$7,708.74	\$154.70 x 26 pay periods = \$4,022.20	\$193.37 x 26 pay periods = \$3,093.92
Total Annual Costs (Contributions + Cost of Care)	\$8,520	\$420 + \$7,708.74 = \$8,128.74	\$680 + \$4,022.20 = \$4,702.20	\$815 + \$3,093.92 = \$3,908.92



Meet Kevin & His Partner

Kevin has heart disease and requires a lot of care. His husband is generally healthy; however, Kevin requires heart surgery, as well as regular check-ups with a cardiologist throughout the year.



Kevin's care includes:

- he and his husband get annual physicals
- his & his husband refill a generic prescription a couple times during the year
- he and his husband visit their primary care provider (PCP) when they are sick
- he has heart surgery and is also prescribed heart medication
- he visits the cardiologist three times



Here's how Kevin and his husband's health care would be covered with each of the plans:

Service (in network)	Average Cost	PPO	PPO Narrow Network	HSA
2 annual physical (one for Kevin & one for husband)	\$120 x2 = \$240	Preventive Medicine is covered at 100% on all Plans		
2 generic prescriptions (one for Kevin & one for husband)	\$40 x2 = \$80	\$10 Copay x2 = \$20	\$10 Copay x2 = \$20	\$30 x2 = \$60 (CVS \$10 discount / script)
2 primary care sick visit (one for Kevin & one for husband)	\$160 x2 = \$320	\$30 x2 = \$60	\$60 x2 = \$120	\$72 x2 = \$144 (CVS 45% discount / visit)
Heart surgery (Kevin)	\$100,000	\$250 Copay, \$3,210 to Kevin's Out-of-Pocket Max – remainder covered at 100%	\$500 Copay, \$6,430 to Out-of-Pocket Max– remainder covered at 100%	\$3,754 to Out-of-Pocket Max – remainder covered at 100%
Heart medication (90 day brand supply, Kevin)	\$360 x3 = \$1,080	Out-of-Pocket met, no additional charges	Out-of-Pocket met, no additional charges	Out-of-Pocket met, no additional charges
3 cardiologist visits (Kevin)	\$250 x3 = \$750	Out-of-Pocket met, no additional charges	Out-of-Pocket met, no additional charges	Out-of-Pocket met, no additional charges
Cost of care for the year	\$102,470	\$3,540	\$7,070	\$3,958
Less Children's Home & Aid \$1500 contribution to HSA	N/A	N/A	N/A	\$3,958 - \$1500 = \$2,458
Annual Health plan Contributions	N/A	\$311.31 x 26 pay periods = \$8,094.12	\$162.43 x 26 pay periods = \$4,223.28	\$203.04 x 26 pay periods = \$5,279.04
Total Annual Costs (Contributions + Cost of Care)	\$102,470	\$3,540 + \$8,094.12 = \$11,634.12	\$7,070 + \$4,223.28 = 11,293.28	\$2,458 + \$5,279.04 = \$7,737.04

